

(one form per family)*
CCD AND GODPARENT REGISTRATION (2017-18)

***Families must be registered in the parish before students can register for CCD/GP**
 (unless permission was granted for other circumstances)

Is your family registered in our parish? _____ Yes _____ No (If “no”, please ask for a parish registration form.)

Student Name (First, Middle Initial, Last)	Gr	Date of Birth	Baptism Church/City/State	Penance Church/City/State	First Com. Church/City/State	Confirmation Church/City/State

Father’s Full Name _____ **Religion** _____

Mother’s Full Name _____ **Religion** _____

Home Address _____

	Home Phone	Cell Phone	Work Phone	Email Address
Mother				
Father				
Guardian *				

*(Guardian if applicable)

CCD-GP Registration (annual fee which includes \$15 Bishop fees)

- \$ 50—one child
- \$100---two children
- \$135---three children
- \$170—four children
- \$185---five children
- \$200—six children

Out-of-Parish Youth:

\$65 per child (with permission from pastors of both parishes)

Paid by check# _____ **\$** _____ **Paid Cash \$** _____

(If not able to pay full amount at time of registration, you may pay in smaller amounts throughout the school year.)

PLEASE TURN PAGE OVER TO CONTINUE⇒⇒⇒⇒⇒

To better serve your children, please list any health or learning problems that we should be aware of.

Are there any court orders or restraining orders concerning your children that we need to be aware of? _____

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ST. VINCENT DE PAUL CCD-GP MEDIA RELEASE 2017-2018

For the purpose of promoting St. Vincent de Paul CCD-GP within the community (Seward County Independent, Milford Times, Southern Nebraska Register, Social Media (*Facebook), please read carefully and complete the following information. (*photos/videos used on the St. Vincent de Paul Catholic Church and School Facebook without tagging students.)

MEDIA RELEASE PERMISSION FORM--REQUIRED

I hereby agree and give my permission for St. Vincent de Paul School and Parish and/or the Diocese of Lincoln to photograph my child’s image/likeness, in any form (hereinafter collectively referred to as “Works”), and to display, publish, distribute or exhibit these Works or any part thereof for the purpose of and in connection with any material that may be created by the Community including, without limitation, for posting on the world wide web (www).

By entering into this informed consent and release and granting the permission as stated herein, I also am releasing the St. Vincent de Paul School and Parish and the Diocese and their respective officers, directors, agents and/or employees from and against any and all liability, loss, damage, costs, claims and/or causes of action arising out of or related to my son/daughter’s participation in any media events, including, without limitation, promotional materials or website projects.

I have read this Informed Consent and Release and understand its terms. I sign it voluntarily and with full knowledge of its significance.

Name(s) of child(ren):

_____(Age)_____
_____(Age)_____
_____(Age)_____
_____(Age)_____
_____(Age)_____
_____(Age)_____

Parent/Guardian’s Name: _____

Parent/Guardian’s Signature: _____

Date: _____

To Contact Us:
Call 402-643-3521
Email: carmenbrowndre@gmail.com